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**FACSIMILE TRANSMISSION COVER SHEET**

Date: March 3, 2006

To: United States Patent and Trademark Office  
Examiner: Chen, Kin Chan; Art Unit: 1765

Fax: (571) 273-8300

Re: **Application Serial No.: 10/705,347**  
Filing Date: 11/8/2003; First-Named Inventor: Labelle  
Attorney Docket No.: 0180151

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 4

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PTO/SB/31 (08-03)

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<b>NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>0180151</b>	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" or successfully transmitted by facsimile to the PTO at facsimile number 571-273-8300 on <u>3/3/06</u> Signature <u>Christina Carter</u> Typed or printed name <u>Christina Carter</u>		In re Application of Labelle, et al. Application Number <b>10/705,347</b> Filed <b>11/08/2003</b> For: <b>Method for Integrating a High-K Gate Dielectric in a Transistor Fabrication Process</b> Art Unit <b>1765</b> Examiner <b>CHEN, Kin Chan</b>	
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. The fee for this Notice of Appeal is (37 CFR 1.17(b)) <b>\$ 500.00</b> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge any fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>50-0731</u> . I have enclosed a duplicate copy of this sheet. <input type="checkbox"/> Fee for ___ extension of time (37 CFR 1.136(a)) included on the attached form PTO-2038. <b>03/06/2006 TL0111 00000003 10705347</b> <b>01 FC:1401 500.00 OP</b> <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b> I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. Registration number <u>38,135</u> <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). _____ <b>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</b>			
<input checked="" type="checkbox"/> *Total of <u>1</u> forms are submitted.			

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on 3/3/06Signature Christina CarterTyped or printed name Christina CarterIn re Application of  
Labelle, et al.Application Number  
10/705,347Filed  
11/08/2003For: Method for Integrating a High-K Gate Dielectric in a  
Transistor Fabrication ProcessArt Unit  
1765Examiner  
CHEN, Kin Chan

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.

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\$ 500.00

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- ☐ applicant/inventor.
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See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
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- ☒ attorney or agent of record.  
Registration number 38,135
- ☐ attorney or agent acting under 37 CFR 1.34(a).  
Registration number if acting under 37 CFR 1.34(a) \_\_\_\_\_

  
Signature

Michael Farjami, Esq.  
Typed or printed name

(949) 282-1000  
Telephone number

3/3/06  
Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

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